JUN 2 8 2004

PRADEMA

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 4 should be completed when appropriate. All further correspondence including the Parent, advance orders and notification of maintenance fees will be mailed to the current correspondence address a indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" fo maintenance fee notifications.

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03/09/2004

LACASSE & ASSOCIATES, LLC 1725 DUKE STREET **SUITE 650 ALEXANDRIA, VA 22314**

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompany in papers. Each additional paper, such as an assignment or formul drawing, muchave its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fcc(s) Transmittal is being deposited with the Unite States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimilitransmitted to the USPTO, on the date indicated below.

(Depositors same (Signature (Date

ATTORNEY DOCKET NO. CONFIRMATION NO. FIRST NAMED INVENTOR APPLICATION NO. FILING DATE 2412 Valentine N. Morozov 10-377 US CIF 09/818.909 03/28/2001

TITLE OF INVENTION: SPECTRAL POWER EQUALIZER FOR WAVELENGTH-MULTIPLEXED OPTICAL FIBER COMMUNICATION LINKS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE \$1330		E PUBLICATION FRE \$300		ZE(S) DUE	DATE DUE	
nonprovisional	NO					1630	06/09/2004	
EXAMINER		ART UNIT		CLASS-SUBCLASS)			
KIANNI	KAVEH C	2877	·	385-037000	_			
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			Randy W. Lacasse, Lacasse & Associates, LLC		
O "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is regulated.						3		

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignor is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment he been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CTTY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE

San Jose California

San Jose, Camordia							
ll not be printed on the patent);	C) individual	Corporation or other private group entity		G governme u			
4b. Payment of Fec(s):							
☐ Igsue Fee ☐ A check in the am			iount of the fee(s) is enclosed.				
Ci Payment by credit card. Form PTO-2038 is attached.							
The Director is he Deposit Account Nur	ereby authorized by charge the required fcc(s), or credit any overpayment, of amber 50-1465 (enclose an extra copy of this form).						
6/28/04	any previously p	nid issue fee to the application identif	fied above.				
(Date)							
<u> </u>	06/29/2004	AWONDAF2 00000056 501465	09818	909			
I not be accepted from anyone the assignee or other party in d Trademark Office.	01 FC:1501 ·						
The information is required to by the USPTO to process) an 37 CFR 1.14. This collection is to preparing, and submitting the depending upon the individual to complete this form and/or chief Information Officer, U.S. minerce, Alexandria, Virginia ORMS TO THIS ADDRESS. 3313-1450.	, 02 1 01 100 1	STORY OF					
	Ab. Payment of Fee(s): Ab. Payment of Fee(s): A check in the ame I Payment by credit The Director is he Deposit Account Nur ication Fee (if any) or to re-apply (Date) I not be accepted from anyone the assignee or other party in d Trademark Office. The information is required to by the USPTO to process) an 37 CFR 1.14. This collection is g, preparing, and submitting the depending upon the individual to complete his form and/or Linic Information Officer, U.S. merce, Alexandria, Virginia ORMS TO THIS ADDRESS.	Ab. Payment of Fee(s): Ab. Payment of Fee(s): A check in the amount of the fee(s) is I Payment by credit card. Form PTO-2 The Director is hereby authorized it beposit Account Number	Ab. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. I Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit card. Form FtO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit card. Form FtO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit card. Form FtO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit card. Form FtO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit card. FtO-1465 The Language of the required to be assigned or other party in the assigne	Ab. Payment of Fee(s): Ab. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. I Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any over the property of this formation fee (if any) or to re-apply any previously paid issue fee to the application identified above. (Date) O6/29/2004 AMONDAF2 00000056 501465 09818 of the assignee or other party in differential to complete this form anyone the assignee or other party in the information is required to by the USPTO to process) an 37 CFR 1.14. This collection is preparing, and submitting the depending upon the individual to complete his form and/or Linic Information Officer, U.S. Innerce, Alexandria, Vignias ORMS TO THIS ADDRESS.			

TRANSMIT THIS FORM WITH FEE(S)

PTOL-85 (Rev. 11/03) Approved for use through 04/30/2004.

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CONFIDENTIAL FACSIMILE TRANSMITTAL SHEET

DATE SENT: June 28, 2004 DELIVER TO: Name: Office of Patent Publication Company: USPTO Phone No: 703-305-8283 Fax No: 703-746-4000 FROM: Thien Tran SERIAL NO.: 09/818,909

OUR DOCKET: 10-377 US CIP

THERE WILL BE A TOTAL OF 4 PAGE(S) INCLUDING THIS COVER SHEET. OUR FACSIMILE MACHINE COMMUNICATES WITH ALL GROUP III, II AND FM6 MACHINES.

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Attached please find the Issue Fee Cover Letter and Issue Fee Transmittal – Part B (in duplicate) for the above-identified case.

JUN 2 8 2004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of: Morozov et al.

File No:

FAX NO. 7038387684

10-377 US CIP

Serial No:

09/818,909

Group:

2877

Filed:

March 28, 2001

Examiner: Kaveh Kianni

For:

SPECTRAL POWER EQUALIZER FOR WAVELENGTH-

MULTIPLEXED OPTICAL FIBER COMMUNICATION LINKS

Mail Stop Issue Fee Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

In response to the Notice of Allowance dated March 9, 2004, enclosed please find Part B - Issue Fee Transmittal, duly completed.

Please charge the required issue and publication fees of \$1630.00 to Deposit Account No: 50-1465.

The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No: 50-1465.

Respectfully submitted,

Thien Tran

Regn No: 47,351

6/28/04

/ara

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